
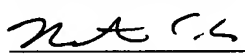


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|--|--|--|--|-------------------------------------|-------------------------------|-----------|--------------------------|--------------------------------|----|--------------------------|----------------------------------|----|--------------------------|---------------------------------|----|--------------------------|---------------------------------|----|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Attorney Docket Number ZCO-100 | | | | | | | | | | | | | | | | |
|  | In re Application of Bredt <i>et al.</i> | | | | | | | | | | | | | | | | | |
| | Application Serial No. 10/848,831 | | | | | | | | | | | | | | | | | |
| | Filed: May 19, 2004 | | | | | | | | | | | | | | | | | |
| | Group Art Unit: 1773 | Examiner: Sheeba Ahmed | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td style="width: 70%;">One month (37 CFR 1.17(a)(1))</td> <td style="width: 20%; text-align: right;">\$ 120.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 07-1700. Enclosed is a duplicate of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 07-1700.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> | | | | <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ 120.00 | <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ | <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ | <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ | <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ |
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ 120.00 | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ | | | | | | | | | | | | | | | | |
| CORRESPONDENCE ADDRESS | | SIGNATURE BLOCK | | | | | | | | | | | | | | | | |
| Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414 | | Respectfully submitted,  Date: May 1, 2007 Reg. No. 44,381 Tel. No.: (617) 570-1806 Fax No.: (617) 523-1231 Natasha C. Us Attorney for Applicant(s) Goodwin Procter LLP Exchange Place Boston, MA 02109 | | | | | | | | | | | | | | | | |

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